SID | M | 8 | 8 | 0 | 1 |

IN CONFIDENCE

1. SURVEY 9 0

PSU

BLOCK

DWELLING

HOUSEHOLD

PERSON

AUSTRALIAN BUREAU OF STATISTICS

POPULATION SURVEY

JANUARY 1988

2. SEX

Male 1

Female 2

3. AGE YEARS

4. MARITAL STATUS

Married 1

De facto 2

Separated 3

Divorced 4

Widowed 5

Never married . . 6

5. S.D. ONLY

S.D. Institutionalised person *(No more questions)* 1

S.D. Boarding school pupil *(No more questions)* 2

S.D. Other 3

6. COUNTRY OF BIRTH

Australia *(Go to Q.8)* 001

U.K. and Ireland . . 002

Italy 003

Greece 004

Yugoslavia 005

Holland 006

Germany 007

New Zealand 008

Other . . . . . .

7. YEAR OF ARRIVAL

8. SCHOOL ATTENDANCE *(If age 15 to 20)*

Date of leaving school *Enter month followed by year*

Still attending 1111

9. PERSON TYPE

Usual resident of P.D. *(Go to Q.11, complete Q.12 to Q.15 when editing)* 1

Visitor to P.D. . . 2

S.D. 3

10. WHAT IS THE POSTCODE OF THE SUBURB OR TOWN WHERE ..... USUALLY LIVES?

A. *If respondent knows postcode, enter in boxes below* 1

If respondent does not know postcode ask for:— 2

Suburb .....

.....

City/Town .....

.....

State ..... *When editing, enter postcode in boxes below*

Not known . . 3

B. Postcode

11. *Sequence Guide*

. *If aged 25 years or more, go to Q.18* 1

. *If still attending school ('1111' in Q.8), go to Q.18* 2

. *Otherwise, go to Q.17* 3

12. HOUSEHOLD TYPE

1 *(Nothing further)* 1

2. 2

3. 3

4. 4

5. 5

6 *(Complete Q.14)* 6

7 *(Complete Q.14)* 7

8 *(Complete Q.14)* 8

9 *(Nothing further)* 9

13. Husband *(Complete Q.15)* 1

Wife *(Nothing further)* . . 2

Son/daughter *(Nothing further)*. 3

14. Father/mother 1

Son/daughter *(Nothing further)*. 2

15. *If Household Type 2, 3 or 6 in Q.12, nothing further.*

If Household Type 4, 5, 7 or 8 in Q.12, enter number of children aged 0 to 14 years

16. OFFICE USE ONLY

Relationship . . . . A

Family No. . . . . B

Children 0-14 years . . C

UR scope/coverage exclusion . . . . D

Incomplete H/H, L/U E

Schedule, initial response F

Schedule, final response G

H

J

K

L

M

FORM S2

FORM S2

17. IS ..... CURRENTLY TAKING ANY COURSE OF FULL-TIME STUDY AT A TECHNICAL COLLEGE, COLLEGE OF ADVANCED EDUCATION OR UNIVERSITY?

- Yes 1
- No 2
- Dec, Jan, Feb only — Not known, unclear . . 3

18. I WOULD LIKE TO ASK YOU ABOUT THE WEEK STARTING MONDAY THE ..... AND ENDING LAST SUNDAY THE ..... THAT IS, LAST WEEK.

19. LAST WEEK, DID ..... DO ANY WORK AT ALL IN A JOB, BUSINESS OR FARM?

- Yes *(Go to Q.21)* 1
- No 2
- Permanently unable to work *(No more questions)* . . 3

20. LAST WEEK, DID ..... DO ANY WORK WITHOUT PAY IN A FAMILY BUSINESS?

- Yes 1
- No *(Go to Q.42)* 2

21. DID ..... HAVE MORE THAN ONE JOB LAST WEEK?

- Yes *(Go to Q.24)* 1
- No *(Go to Q.30)* 2

22.

23.

24. WAS THAT BECAUSE ..... CHANGED JOBS DURING THE WEEK?

- Yes *(Go to Q.29A)* 1
- No *(Go to Q.29B)* 2

25.

26.

27.

28.

29A. I WOULD NOW LIKE TO ASK YOU ABOUT ..... PRESENT JOB.

Go to Q.30

29B. I WOULD NOW LIKE TO ASK YOU ABOUT THE JOB IN WHICH ..... USUALLY WORKS THE MOST HOURS.

30. DID ..... WORK —

- FOR AN EMPLOYER FOR WAGES OR SALARY? *(Go to Q.34)* 1
- IN ..... OWN BUSINESS WITH EMPLOYEES? 2
- WITH NO EMPLOYEES? 3
- WITHOUT PAY IN A FAMILY BUSINESS? *(Go to Q.34)*. 4
- WHAT ARE ..... WORKING ARRANGEMENTS?
  - Payment in kind *(Go to Q.34)*. . . . 5
  - Unpaid voluntary work *(Go to Q.68)* 6

31A. IS ..... BUSINESS A LIMITED LIABILITY COMPANY?

- Yes *(Go to Q.34)* 1
- No *(Go to Q.34)* 2

31B.

32.

33.

34A. ON WHICH DAYS DID ..... WORK LAST WEEK (IN ALL JOBS)?

	Yes	No		Yes	No
MON	○	○	SAT	○	○
TUES	○	○	SUN	○	○
WED	○	○			
THU	○	○			
FRI	○	○			

34B. DID ..... HAVE ANY TIME OFF FROM ..... JOB(S) ON THOSE DAYS? ○—○

34C. DID ..... WORK ANY PAID OR UNPAID OVERTIME ON ANY DAY LAST WEEK?

- Yes 1
- No 2
- Other 3

34D. HOW MANY HOURS DID ..... ACTUALLY WORK LAST WEEK (LESS THE TIME OFF) (BUT) (COUNTING THE OVERTIME)?

- 35 hours or more *(No more questions)*
- 1-34 hours *(Go to Q.35)* . . . .
- Less than 1 hour/no hours *(Go to Q.55)* 99

FORM S2

35. IN (THAT JOB/THOSE JOBS) DOES ..... USUALLY WORK LESS THAN 35 HOURS A WEEK?

- Yes *(Go to Q.38)* 1
- No 2

36. WHY DID ..... WORK LESS THAN 35 HOURS LAST WEEK?

- Own illness or injury . . 1
- Leave, holiday or flextime/ personal reasons 2
- Began job during week . . 3
- Left/lost job during week 4
- On strike/locked out . . 5
- Bad weather/breakdown . . 6
- Stood down/on short time/ insufficient work 7
- Shift work/standard work arrangements 8
- Other .....
- .....
- 9

37. *No more questions*

38. WOULD ..... PREFER A JOB IN WHICH ..... WORKED MORE HOURS A WEEK?

- Yes 1
- No *(No more questions)* . . 2
- Don't know *(No more questions)* . . 3

39. AT ANY TIME DURING THE LAST 4 WEEKS HAS ..... BEEN LOOKING FOR FULL-TIME WORK?

- Yes 1
- No *(No more questions)* . . 2

40. AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- WRITTEN, PHONED OR APPLIED IN PERSON TO AN EMPLOYER FOR WORK? 01
- ANSWERED A NEWSPAPER ADVERTISEMENT FOR A JOB? 02
- LOOKED IN NEWSPAPERS?
  - Yes
  - No
- CHECKED FACTORY OR COMMONWEALTH EMPLOYMENT SERVICE NOTICE BOARDS? 03

AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- BEEN REGISTERED WITH THE COMMONWEALTH EMPLOYMENT SERVICE? 04
- CHECKED OR REGISTERED WITH ANY OTHER EMPLOYMENT AGENCY? 05
- DONE ANYTHING ELSE TO FIND A JOB?
  - Advertised or tendered for work 06
  - Contacted friends/relatives 07
  - Other .....
  - .....
  - 08
  - Only looked in newspapers 09
  - None of these 10

41. *No more questions*

FORM S2

42. DID ..... HAVE A JOB, BUSINESS OR FARM THAT ..... WAS AWAY FROM BECAUSE OF HOLIDAYS, SICKNESS OR ANY OTHER REASON?

Yes 1

No *(Go to Q.68)* 2

43. DID ..... HAVE MORE THAN ONE JOB?

Yes *(Go to Q.48)* 1

No *(Go to Q.51)* 2

44.

45.

46.

47.

48. I WOULD NOW LIKE TO ASK YOU ABOUT THE JOB IN WHICH ..... USUALLY WORKS THE MOST HOURS. *Go to Q.51*

49.

50.

51. DOES ..... WORK —

FOR AN EMPLOYER FOR WAGES OR SALARY? *(Go to Q.55)* 1

IN ..... OWN BUSINESS WITH EMPLOYEES? 2

WITH NO EMPLOYEES? 3

WITHOUT PAY IN A FAMILY BUSINESS? *(Go to Q.53)* 4

WHAT ARE ..... WORKING ARRANGEMENTS?

Payment in kind *(Go to Q.55)* 5

Unpaid voluntary work *(Go to Q.68)* 6

52. IS ..... BUSINESS A LIMITED LIABILITY COMPANY?

Yes *(Go to Q.55)* 1

No 2

53. WHY WAS ..... AWAY FROM WORK LAST WEEK?

Own illness or injury . . 1

Holiday/personal reasons 2

No work available 3

Bad weather/breakdown 4

On strike/locked out . . 5

Other .....

..... 6

54. *Go to Q.63*

FORM S2

55. WHY WAS ..... AWAY FROM WORK LAST WEEK?

- Own illness or injury . . 1
- Leave, holiday or flextime/personal reasons *(Go to Q.61)* 2
- Bad weather/breakdown *(Go to Q.61)* 3
- Stood down *(Go to Q.58)* 4
- No work/insufficient work *(Go to Q.59)* 5
- On strike/locked out *(Go to Q.63)* 6
- Usually works less than 1 hour a week/began job/lost job *(Go to Q.68)* 7
- Other *(Go to Q.61)* .....
- 8

56. WAS ..... ON WORKERS' COMPENSATION LAST WEEK?

- Yes 1
- No *(Go to Q.61)* 2

57. WILL ..... BE RETURNING TO WORK FOR ..... EMPLOYER?

- Yes *(Go to Q.63)* 1
- No *(Go to Q.68)* 2
- Don't know *(Go to Q.68)* 3

58. WHY WAS ..... STOOD DOWN?

- Bad weather/breakdown *(Go to Q.61)* 1
- Other 2

59. WAS ..... PAID OR WILL ..... BE PAID FOR ANY OF LAST WEEK?

- Yes *(Go to Q.63)* 1
- No 2

60. HOW LONG HAS ..... BEEN AWAY FROM WORK WITHOUT PAY?

- One week *(Go to Q.63)* . . 1
- Two weeks *(Go to Q.63)* 2
- Three weeks *(Go to Q.63)* 3
- Four weeks or more *(Go to Q.68)* 4

61. UP UNTIL THE END OF LAST WEEK, HOW LONG HAD ..... BEEN AWAY FROM WORK?

- Less than 4 weeks *(Go to Q.63)* 1
- 4 weeks or more 2

62. WAS ..... PAID OR WILL ..... BE PAID FOR ANY PART OF THE LAST FOUR WEEKS?

- Yes 1
- No *(Go to Q.68)* 2

63. HOW MANY HOURS A WEEK DOES ..... USUALLY WORK IN (ALL) ..... JOB(S)?

- 35 hours or more *(No more questions)* . . 1
- 1-34 hours 2
- No hours *(Go to Q.68)* 3

64. WOULD ..... PREFER A JOB IN WHICH ..... WORKED MORE HOURS A WEEK?

- Yes 1
- No *(No more questions)* . . 2
- Don't know *(No more questions)* . . 3

65. AT ANY TIME DURING THE LAST 4 WEEKS HAS ..... BEEN LOOKING FOR FULL-TIME WORK?

- Yes 1
- No *(No more questions)* . . 2

66. AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- WRITTEN, PHONED OR APPLIED IN PERSON TO AN EMPLOYER FOR WORK? 01
- ANSWERED A NEWSPAPER ADVERTISEMENT FOR A JOB? 02
- LOOKED IN NEWSPAPERS?
  - Yes ○
  - No ○
- CHECKED FACTORY OR COMMONWEALTH EMPLOYMENT SERVICE NOTICE BOARDS? 03

AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- BEEN REGISTERED WITH THE COMMONWEALTH EMPLOYMENT SERVICE? 04
- CHECKED OR REGISTERED WITH ANY OTHER EMPLOYMENT AGENCY? . . 05
- DONE ANYTHING ELSE TO FIND A JOB?
  - Advertised or tendered for work 06
  - Contacted friends/relatives 07
  - Other .....
  - 08
  - Only looked in newspapers 09
  - None of these 10

67. *No more questions*

FORM S2

68. AT ANY TIME DURING THE LAST 4 WEEKS HAS ..... BEEN LOOKING FOR FULL-TIME WORK?

- Yes *(Go to Q.70)* 1
- No 2

69. HAS ..... BEEN LOOKING FOR PART-TIME WORK AT ANY TIME DURING THE LAST 4 WEEKS?

- Yes 1
- No *(No more questions)* . . 2

70. AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- WRITTEN, PHONED OR APPLIED IN PERSON TO AN EMPLOYER FOR WORK? 01
- ANSWERED A NEWSPAPER ADVERTISEMENT FOR A JOB? 02
- LOOKED IN NEWSPAPERS?
  - Yes
  - No
- CHECKED FACTORY OR COMMONWEALTH EMPLOYMENT SERVICE NOTICE BOARDS? 03

AT ANY TIME IN THE LAST 4 WEEKS HAS .....

- BEEN REGISTERED WITH THE COMMONWEALTH EMPLOYMENT SERVICE? 04
- CHECKED OR REGISTERED WITH ANY OTHER EMPLOYMENT AGENCY? 05
- DONE ANYTHING ELSE TO FIND A JOB?
  - Advertised or tendered for work 06
  - Contacted friends/relatives 07
  - Other *(No more questions)*
    - .....
    - .....
    - 08
  - Only looked in newspapers *(No more questions)* . . 09
  - None of these *(No more questions)* . . 10

71. IF ..... HAD FOUND A (PART-TIME) JOB COULD ..... HAVE STARTED WORK LAST WEEK?

- Yes *(Go to Q.76)* 1
- No 2
- Don't know *(Go to Q.76)* 3

72. WHAT WERE THE REASONS ..... COULD NOT HAVE STARTED WORK LAST WEEK?

- Own illness or injury . . 1
- Going to school *(No more questions)* . . 2
- Going to a tertiary institution *(No more questions)* . . 3
- Personal reasons, family responsibilities *(No more questions)* . . 4
- Waiting to start job *(Go to Q.74)* 5
- Other *(No more questions)*
  - 6

73. UP UNTIL THE END OF LAST WEEK HOW LONG HAD ..... BEEN ILL?

- Less than 4 weeks *(Go to Q.76)* 1
- 4 weeks or more *(No more questions)* . . 2

74. WHEN WILL ..... BE STARTING WORK IN THAT JOB?

- Less than 4 weeks 1
- 4 weeks or more *(No more questions)* . . 2

75. IF THE JOB HAD BEEN AVAILABLE LAST WEEK, WOULD ..... HAVE STARTED THEN?

- Yes 1
- No *(No more questions)* . . 2

76. WHEN DID ..... BEGIN LOOKING FOR WORK?

- Enter date .....
- Less than 2 weeks 001
- No. of weeks . . . . [ ][ ][ ]

77. HOW LONG AGO IS IT SINCE ..... LAST WORKED FULL-TIME FOR TWO WEEKS OR MORE?

- Enter date .....
- Under 2 years (no. of weeks) [ ][ ][ ]
- 2 years or more *(Go to Q.87)* 104
- Never worked full-time for 2 weeks or more but has worked *(Go to Q.87)* . . 998
- Has never worked *(No more questions)* . . 999

FORM S2

78. WHAT KIND OF WORK DID ..... DO?

.....

.....

.....

.....

79. WHO DID ..... WORK FOR?
(Name/Full address)

.....

.....

.....

80. WHAT KIND OF INDUSTRY, BUSINESS, OR SERVICE WAS CARRIED OUT AT THAT ADDRESS?

.....

.....

.....

81. DID ..... WORK —

FOR AN EMPLOYER FOR WAGES OR SALARY? *(Go to Q.83)* 1

IN ..... OWN BUSINESS WITH EMPLOYEES? 2

WITH NO EMPLOYEES? 3

WITHOUT PAY IN A FAMILY BUSINESS? *(Go to Q.83)* 4

WHAT WERE ..... WORKING ARRANGEMENTS?

Payment in kind *(Go to Q.83)* 5

Unpaid voluntary work *(Go to Q.87)* 6

82. WAS ..... BUSINESS A LIMITED LIABILITY COMPANY?

Yes 1

No *(Go to Q.86)* 2

83. WHY DID ..... LEAVE THE JOB WITH *(Employer in Q.79)*?

Laid off — no work available/retrenched/made redundant/employer went out of business/dismissed etc. 1

Job was temporary or seasonal *(Go to Q.85)* . . 2

Own ill health or injury . . 3

Unsatisfactory work arrangements/pay/hours 4

Holiday job *(Go to Q.85)* 5

Other reasons — returned to studies/marry/children/look after others/have holiday/moved house/spouse transferred etc. . . 6

84. *Go to Q.87*

85. DID ..... LEAVE THE JOB TO RETURN TO STUDIES?

Yes *(Go to Q.87)* 1

No *(Go to Q.87)* 2

86. WHY DID ..... STOP WORKING IN THAT BUSINESS?

Closed down for economic reasons — went broke/liquidated/no work/no supply or demand etc. . . 1

Own ill health or injury . . 2

Closed down or sold for other reasons 3

87. (SINCE *date in Q.77*) HAS ..... WORKED PART-TIME FOR TWO WEEKS OR MORE?

Yes 1

No *(No more questions)* . . 2

88. HOW LONG AGO IS IT SINCE ..... LAST WORKED PART-TIME FOR TWO WEEKS OR MORE?

Enter date .....

Under 2 years (no. of weeks) *(No more questions)*

2 years or more *(No more questions)* . . 104

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